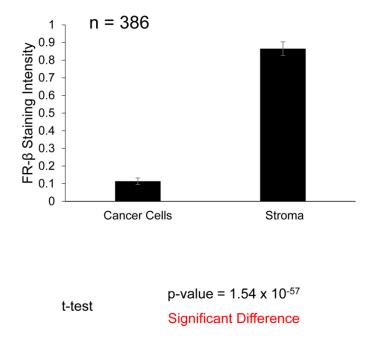
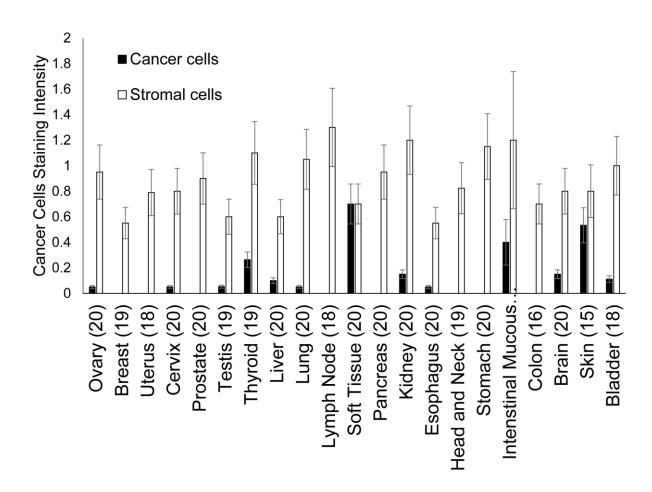
Assessment of folate receptor-B expression in human neoplastic tissues

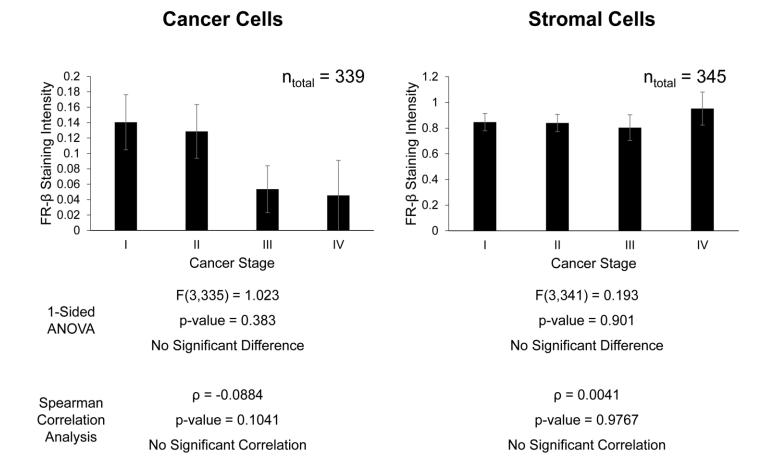
Supplementary Material



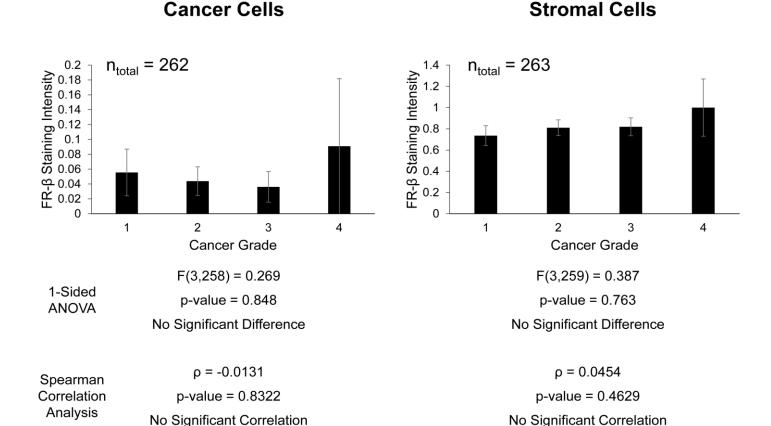
SI Figure 1: FR-β staining intensity of cancer and stromal cells. IHC was performed on a tissue microarray using the antibody m909. The staining intensity within the tumor and stroma were graded on a scale of 0 to 3 and the average value is plotted (error bars represent SEM). A t-test (assuming equal variance and 2-tailed) was used to determine if there were any statistically significant differences between cancer and stromal cells.



SI Figure 2: FR- β staining intensity in cancer and stromal cells. IHC was performed on a tissue microarray using the antibody m909. The staining intensity within the tumor and stroma were graded on a scale of 0 to 3. Average staining intensity is plotted for each cancer tissue type (error bars represent SEM) and the number of samples is shown in parenthesis.



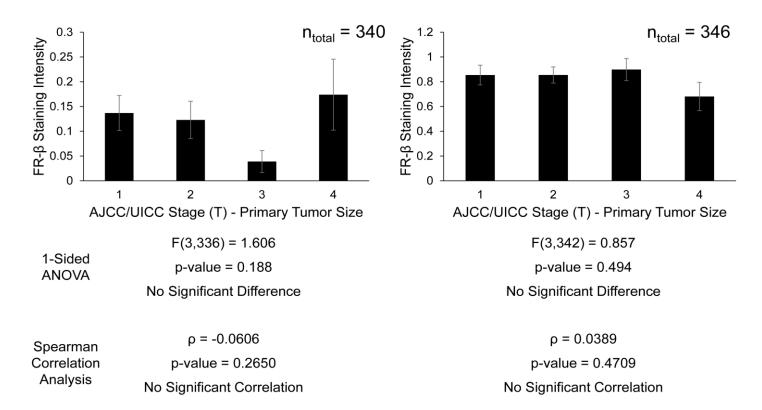
SI Figure 3: Correlation analysis of FR-β staining intensity and cancer stage. IHC was performed on a tissue microarray using the antibody m909. The staining intensity within the tumor and stroma were graded on a scale of 0 to 3 and the average is plotted (error bars represent SEM). A 1-sided ANOVA and Spearman correlation analysis were used to determine if there were any statistically significant differences between the individual groups and/or if there was a significant correlation between the intensity staining and the cancer stage.



SI Figure 4: Correlation analysis of FR- β staining intensity and cancer grade. IHC was performed on a tissue microarray using the antibody m909. The staining intensity within the tumor and stroma were graded on a scale of 0 to 3 and the average is plotted (error bars represent SEM). A 1-sided ANOVA and Spearman correlation analysis were used to determine if there were any statistically significant differences between the individual groups and/or if there was a significant correlation between the intensity staining and the cancer grade.

Cancer Cells

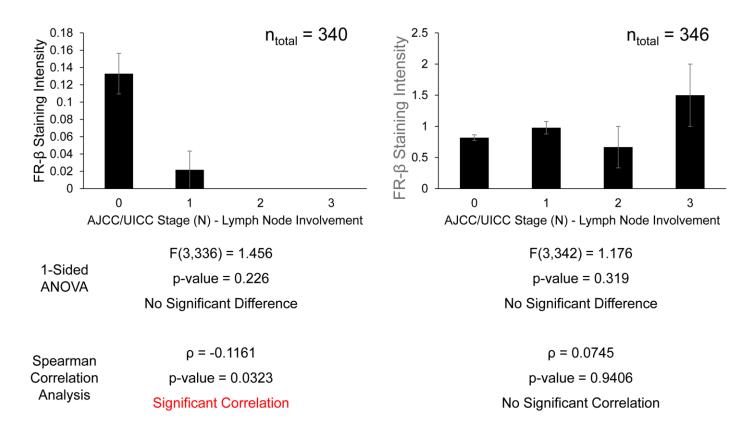
Stromal Cells



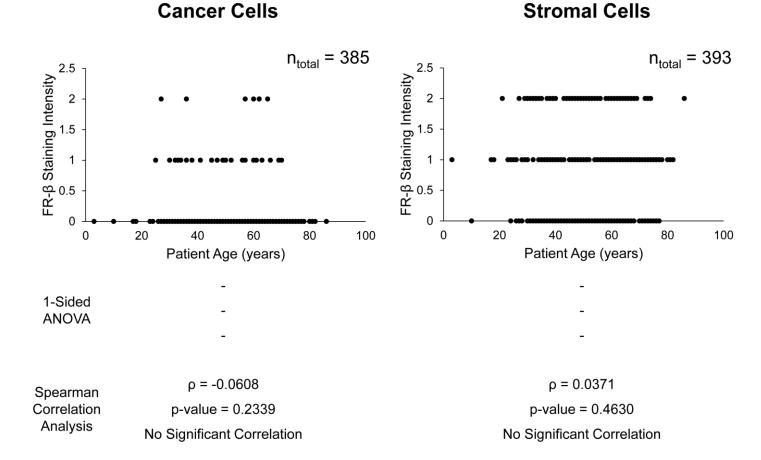
SI Figure 5: Correlation analysis of FR-β staining intensity and AJCC/UICC T value (size of primary tumor). IHC was performed on a tissue microarray using the antibody m909. The staining intensity within the tumor and stroma were graded on a scale of 0 to 3 and the average is plotted (error bars represent SEM). A 1-sided ANOVA and Spearman correlation analysis were used to determine if there were any statistically significant differences between the individual groups and/or if there was a significant correlation between the intensity staining and the primary tumor size.



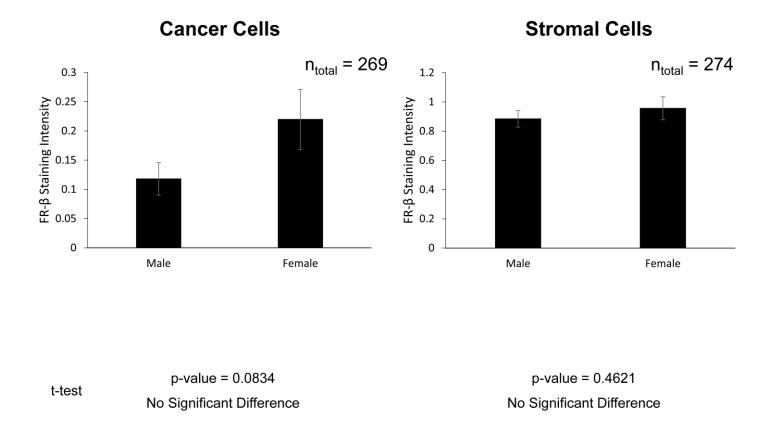
Stromal Cells



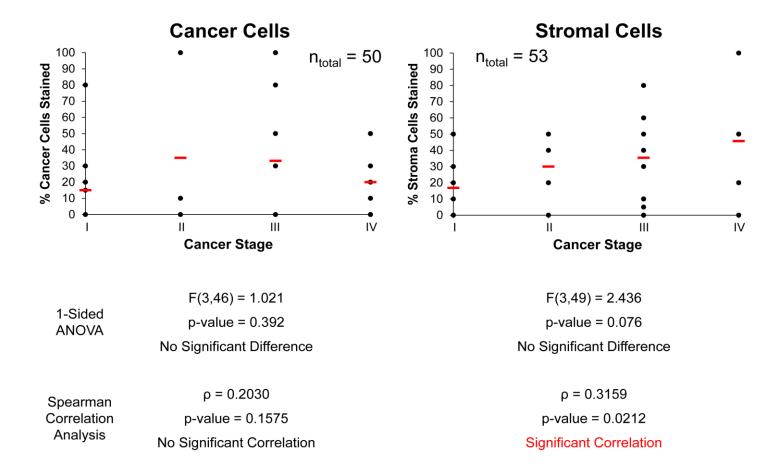
SI Figure 6: Correlation analysis of FR-β staining intensity and AJCC/UICC N value (level of lymph node involvement). IHC was performed on a tissue microarray using the antibody m909. The staining intensity within the tumor and stroma were graded on a scale of 0 to 3 and the average is plotted (error bars represent SEM). A 1-sided ANOVA and Spearman correlation analysis were used to determine if there were any statistically significant differences between the individual groups and/or if there was a significant correlation between the intensity staining and the lymph node involvement.



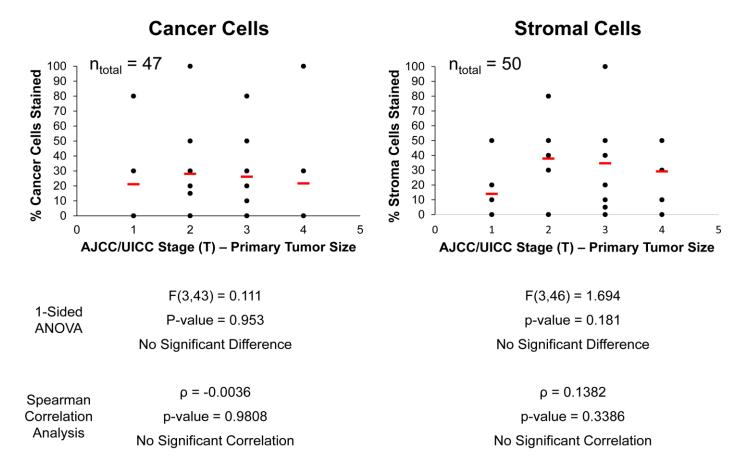
SI Figure 7: Correlation analysis of FR- β staining intensity and patient age at cancer excision. IHC was performed on a tissue microarray using the antibody m909. A Spearman correlation analysis were used to determine if there was a significant correlation between the intensity staining and the patient's age.



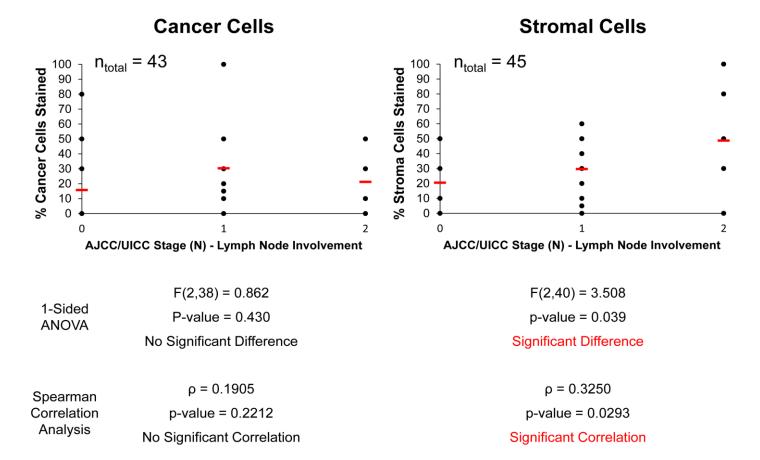
SI Figure 8: Correlation analysis of FR- β staining intensity and patient sex. IHC was performed on a tissue microarray using the antibody m909. The staining intensity within the tumor and stroma were graded on a scale of 0 to 3 and the average is plotted (error bars represent SEM). A t-test (assuming equal variance and 2-tailed) was used to determine if there were any statistically significant differences in staining intensity between males and females.



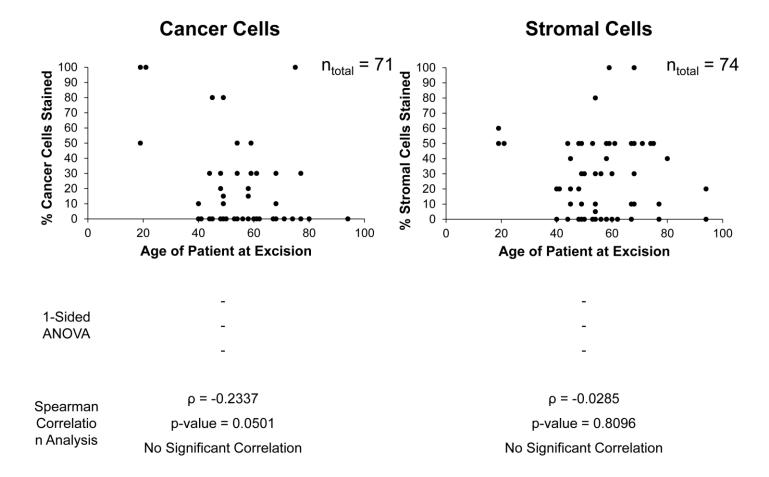
SI Figure 9: Correlation analysis of FR- β % cells staining positive and cancer stage. IHC was performed on a tissue microarray using the antibody m909. The approximate percentage of positively staining cells within the tumor and stroma were determined (red bars represent population mean). A 1-sided ANOVA and Spearman correlation analysis were used to determine if there were any statistically significant differences between the individual groups and/or if there was a significant correlation between the percentage of positive staining cells and the stage of the cancer.



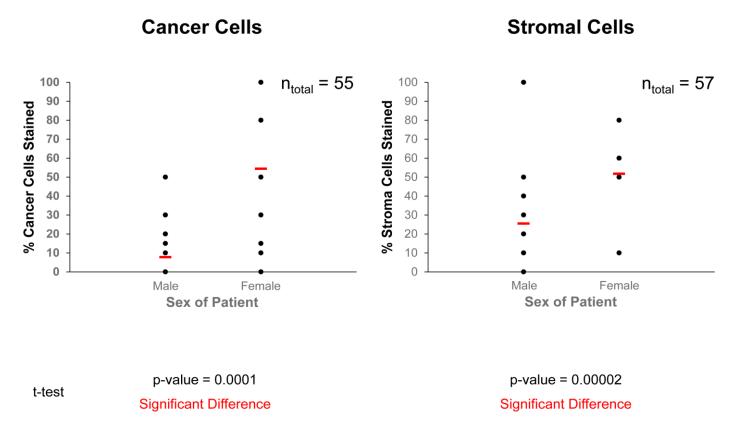
SI Figure 10: Correlation analysis of FR- β % cells staining positive and AJCC/UICC T value (size of primary tumor). IHC was performed on a tissue microarray using the antibody m909. The approximate percentage of positively staining cells within the tumor and stroma were determined (red bars represent population mean). A 1-sided ANOVA and Spearman correlation analysis were used to determine if there were any statistically significant differences between the individual groups and/or if there was a significant correlation between the percentage of positive staining cells and the size of the primary tumor.



SI Figure 11: Correlation analysis of FR- β % cells staining positive and AJCC/UICC N value (level of lymph node involvement). IHC was performed on a tissue microarray using the antibody m909. The approximate percentage of positively staining cells within the tumor and stroma were determined (red bars represent population mean). A 1-sided ANOVA and Spearman correlation analysis were used to determine if there were any statistically significant differences between the individual groups and/or if there was a significant correlation between the percentage of positive staining cells and the level of lymph node involvement.



SI Figure 12: Correlation analysis of FR- β % cells staining positive and patient age at tumor excision. IHC was performed on a tissue microarray using the antibody m909. The approximate percentage of positively staining cells within the tumor and stroma were determined. A Spearman correlation analysis was used to determine if there was a significant correlation between the percentage of positive staining cells and the patient age at tumor excision.



SI Figure 13: Correlation analysis of FR- β % cells staining positive and patient sex. IHC was performed on a tissue microarray using the antibody m909. The approximate percentage of positively staining cells within the tumor and stroma were determined (red bars represent population mean). A t-test (assuming equal variance and 2-tailed) was used to determine if there were any statistically significant differences between males and females.